POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*Th.*		6.9.00
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	*#5.*	545 10	6-16-00
RESPONSE FORMALITY REVIEW			7/26/00

INDEX OF CLAIMS

✔	.... Rejected	N	.... Non-elected
=	.... Allowed	I	.... Interference
—	(Through numeral)... Canceled	A	.... Appeal
÷	.... Restricted	O	.... Objected

Claim (Final / Original)	Date 4/29/03 1/21/04								Claim (Final / Original)	Date								Claim (Final / Original)	Date							
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19	✔								52										102								
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If more than 150 claims or 10 actions
staple additional sheet here

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